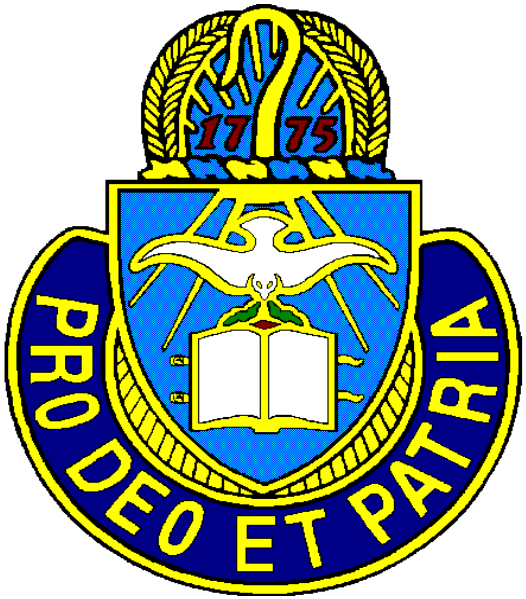

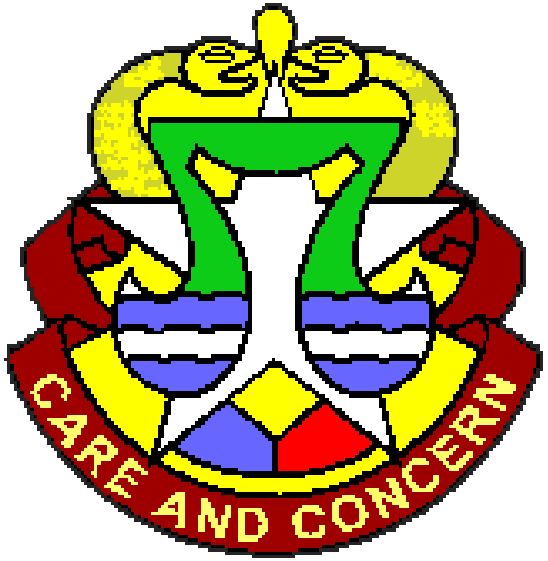

Department of Ministry and Pastoral Ca
Darnall Army Community Hospita
Fort Hood, Texas

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TRAINING FOCUS

"Refresher on Garrison Operations, Mass Casualty Overview, and Hospital Ministry"

UNCLASSIFIED

DEPARTMENT OF MINISTRY AND PASTORAL CARE

DARNALL ARMY COMMUNITY HOSPITAL

AGENDA

0730 - 0733 Task and Focus of Training

0733 - 0735 Agenda

0735 - 0745 Devotional (CH Read)

0745 - 0800 Unique Faith Group Presentation (CH Coleman)

0800 - 0810 Break & Set up

0810 - 0900 Presentation #1 "Garrison Chaplain's Office"

0900 - 0910 Break & Set up

0910 - 1000 Presentation #2 "MASCAL Overview"

1000 - 1010 Break & Set up

1010 - 1100 Presentation #3 "Hospital Ministry" (Chaplains and Chaplain Assistant breakout)

1100 - 1110 Break

1110 - 1120 CH Councell's Closing Remarks on Training (All back in sanctuary)

1120 - 1130 Admin Time

MASS CASUALTY OVERVIEW

Definition: "A Mass Casualty (MASCAL) is an event, crisis, natural disaster that taxes all normal resources and necessitates the inclusion and involvement of additional resources."

Read

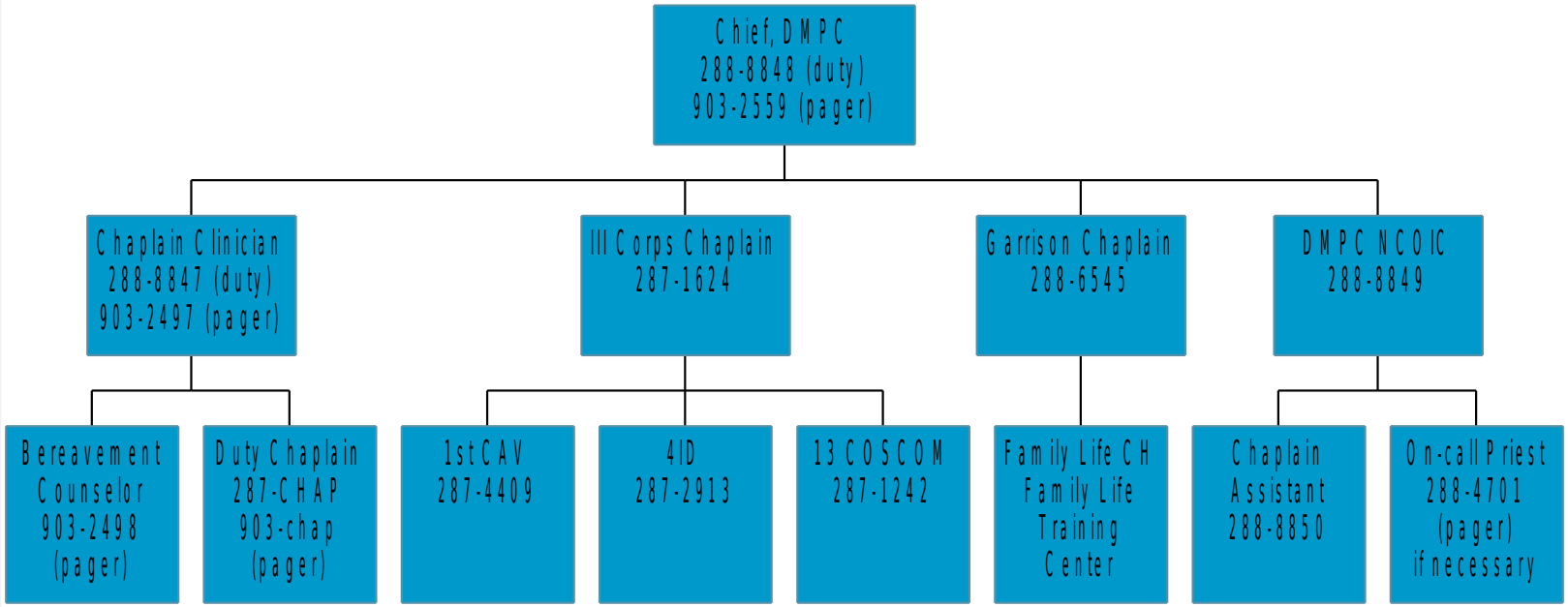
Who controls Unit Ministry Team Assets in the event of a MASCAL?

III Corps and Ft. Hood Chaplains Office

First call will normally come from the MEDDAC Chaplain's Office, "This is an exercise message (or not). This is the MEDDAC Chaplain's office, we have a fire at DACH with casualties. We need two UMTs to augment the office. If possible, we request personnel with Clinical Pastoral Care training or hospital experience. Request that selected personnel telephone the hospital Chaplain's Office for further instructions." (If this is an exercise the call will end with: "This is an exercise message.")

There may be subsequent calls if needed!

Chaplain Notification Plan



Not clear who the separates are under.

DACH has contingency plans in its Emergency Preparedness Plan (EPP), which is currently under review and revision.

Concept of Operation

Emergency Notification

(1) Senior Member of DMPC will initiate the DMPC annex of the MEDDAC EPP.

(2) If scope of Disaster exceeds the capability of the DACH UMT, requests will go to III Corps CH Office & Duty CH, for additional coverage.

Concept of Operations (cont.)

(3) DMPC UMT will establish a Family Assistance Center in the Ob/Gyn clinic or another designated area to receive and counsel family members as required.

(4) DMPC will ensure 24 hr ops (presence or liaison) when continuous ops are required.

Tasks

Chief, DMPC

(a) Triage area & patient holding area to assess the need for additional UMT support.

(b) Advise the III Corps CH on needed support.

Tasks (cont.)

Chief, DMPC

(C) Assign duty areas for incoming UMTs and introduce them to those areas. (Arm bands)

(d) Update the III Corps and Garrison Chaplain's Office of medical emergencies as they develop.

Tasks (cont.)

Ward Chaplain

(a) Contact On-call Chaplain

(b) Contact On-call Bereavement Counselor

c) Report to Triage area ASAP

(d) Move to other areas once Triage UMT has arrived.

(e) Coordinate UMT coverage with Chief, DMPC

Tasks (cont.)

NCOIC, DMPC

(a) Responsible for opening the Family Assistance Center

(b) Provide administrative support and control of the Family Assistance Center.

Tasks (cont.)

Chaplain Assistant, DMPC

(a) Ensure telephone coordination is accomplished.

(b) Direct UMTs to their assigned areas.

C) Coordinate availability of supplies and literature.

Tasks (cont.)

MASCAL UMTs

(a) Telephone the MEDDAC DMPC Office when tasked by the III Corps Chaplain's Office

(b) Report to the MEDDAC DMPC office for area assignment

c) Supply your own ecclesiastical supplies for ministering to casualties

(d) Make appropriate entries on admission sheets and/or patient tag regarding religious ministrations.

Areas Where UMTs are Needed

Triage Area ***(One UMT - Protestant Chaplain)***

Immediate ***(Two UMTs - one Protestant and***

one Roman Catholic Chaplain)

Minimal ***(One UMT - Protestant Chaplain)***

Delayed ***(One UMT - Can be any faith)***

Expectant ***(Two UMTs - One Protestant &***

one Roman Catholic Chaplain)

Triage Area

- ***Chaos - Receiving area for casualties.***
- ***UMT determines religious preference and spiritual needs. Annotate triage tag.***
- ***UMT interviews non-casualties (family members, unit personnel, friends, etc..)***
- ***Depending on volume, may use one to two other UMTs.***

Immediate

(Two UMTs and will probably utilize the DACH priest here)

- ***The Priest (whether DACH or not) will coordinate the ministry in this area.***
- ***Significant amount of sacramental and rite ministry.***

Minimal

- ***Begin to identify specific faith needs that can be forwarded and coordinated.***
- ***Ministry of presence and assurance. A lot of active listening.***

Delayed

- ***Same as minimal, but a lower category.***

Expectant

(Two UMTs - One Protestant and one Catholic Chaplain.)

- ***Ministry to those who are dying, comfort, sacraments, rites, prayer, ordinances. Dignity.***
- ***Annotate ministrations on Triage tag.***

Family Assistance Center

(Four UMTs - Broad spectrum of faith)

- ***Broad-based ministry to families***
- ***Do Family Life Chaplains figure in here?***
- ***Bereavement Counselors***

Concerns and Considerations

- ***Control of assets - III Corps CH ultimately, in DACH, Chief, DMPC***
- ***Assistants and chaplains may help carry litters and run messages.***
- ***No cellphones!!!***
- ***No discussion of patient's medical condition with anyone who is not a medical or spiritual caregiver.***
- ***Class A Telephone in DMPC office***

Where We Need More Work

- *Crawl, Walk, Run*
- *Refine, Rehearse, Review*
- *Look for an opportunity to practice*
- *Update information on a Bi-annual basis.*

Optempo and Deployment Posture

- ***Almost need multiple plans/contingencies based upon who is here and who is not.***
- ***Primary and alternate UMTs for each area.***
- ***What ifs***
- ***Let MSCs determine assets and forward to III Corps Chaplain's Office***

What Makes Sense to Me!

- ***Sit down and wargame, sooner not later.***
- ***Invite/encourage MSCs to identify UMT members - who you suspect or know will do well. 7R qualified chaplains are a plus or any with hospital or pastoral care experience.***
- ***When we can place names with a plan, the next step is to train and practice.***

Questions?????

Hospital Ministry

How many of you have had a unit or more of CPE?

CPE has moved in the direction of being offered to Chaplain (Captains) in the 3-5 year range. Few exception are being granted.

CPE is not for everyone!!! But it is necessary to serve in a 7R slot.

Hospital Ministry

- ***7R indicates that you have certain clinical skills and abilities that are suited for the clinical setting of the hospital.***
- ***Not all 7R slots are in fixed-site medical treatment facilities. Where are others?***

Clinical Pastoral Education (CPE)

- ***20 slots selected from the CVI list***
- ***Two boards a year***
- ***Four training centers***

Walter Reed Army Medical Center

Brooke Army Medical Center

Madigan Army Medical

What is the Hospital Chaplain's Main Mission or Function?

What is the Hospital Chaplain's Main Mission or Function?

By definition: Care of the Staff!!!! Patient care will always be a pretty close second.

Facts about DACH and DMPC

- ***140 bed community hospital***
- ***Wards***

  Psychiatric (10)

  Pediatric (10)

  Medical/Surgical Ward (30)

  Same Day Surgery (24 hours)

  Mother Baby Unit (24/24)

  Neo Natal Nursery (10)

  CCU/CDU (6/1)

Facts about DACH and DMPC

- *Clinics Internal to DACH*
- *Two Residencies - Emergency Medicine (18) and Family Practice (first five residents this summer, eventually to expand to 18 over the next couple of years)*
- *A little bit less than 2300 personnel at DACH to include military, civilian, contractor, and volunteers. A little over 500 for DENTAC and VETCOM.*
- *49 different facilities. Most are located at Ft. Hood, Killeen and Copperas Cove. Some VET sites are in other states and there is a health clinic that we are responsible for in North Texas.*

Facts about DACH and DMPC

- ***Largest MEDDAC in the Army with over 105,000 Tricare Prime enrollees. Approximately 95,000 are active duty soldiers and family members.***
- ***Average inpatient census in 85-90 in Summer and 95-100+ in the Fall/Winter***
- ***3000 birth a year, approximately 500***

Facts about DACH and DMPC

- ***Approximately 1800 to 1900 appointment calls a day.***
- ***23 surgeries a day***
- ***1,000,000 inpatient visits made annually.***
- ***Level three Trauma Center***

Department of Ministry and Pastoral Care

Chief, DMPC - CH (LTC) John D. Read

Chaplain Clinician - CH (CPT) David R. Kirk

NCOIC, DMPC - SSG Michael Forsyth

Chaplain Assistant - SGT Fred Owens

How is Ministry Different in a Hospital?

- *The Day is Shaped Differently. Begins as early as 0730 Morning Report and often at 0600 to pray for first surgery cases. PT is either early, lunch or late afternoon or early evening. Our duty day, generally, is 0730 - 1700.*
- *Unit ministry in the TO & E side of the house is "Muddy Boots" in the hospital setting it is "Bloody Boots".*
- *On-call to the staff 24/7. Average around 3 to 4 calls back to the hospital a week that I ought to come in for. We also take weekend coverage.*

How is Hospital Ministry Different?

- ***Charting patient visits.***
- ***Spiritual Assessments. My two assistants have been given the mission to spiritually assess every new admit.***
- ***Multi-disciplined on a daily basis.***
- ***Performance "doing" oriented in the unit, more "being" oriented in the hospital setting due to the clinical setting. This is not absolute, just an observance from my own journey.***
- ***Being "with" people.***

Areas where I am involved:

- ***Staff/Patient/family member care***
- ***No Protestant service, so I will plug in to 13th COSCOM for now.***
- ***Training in areas that I can add depth to, spiritual assessment***
- ***Community Involvement - Tree Lighting***
- ***Caring Hearts - Bereavement 90 plus volunteer counselors.***
- ***Conflict Resolution/Management***
- ***Critical Event Debriefing***
- ***Counseling (five to six walk-ins a day, normal counseling load)***
- ***Baptisms, weddings, funerals***
- ***Ethics committee - key ethical player at DACH***
- ***Patient Rights and Organizational Ethics Champion for JCAHO***
- ***Case Review Committee***
- ***Installation Suicide Prevention Team***

Initial Observations

- ***Good support from folks in the field around seeing their soldiers and family members. Liaison office is doing a great job! Seeing some chaplain assistants as well.***
- ***We are here to help you and support you in your ministry.***

My Story and My Passion

Darnall is a great place to be involved in ministry!!!!!

QUESTIONS????